CLAIMS AS FILED - PART I (Column 1) (Column 2)	SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY
TOTAL CLAIMS	RATE FEE RATE FEE
FOR NUMBER FILED NUMBER EXTRA	BASIC FEE 385.00 OR BASIC FEE 770.00
TOTAL CHARGEABLE CLAIMS 9 minus 20= .	XS 9= . OR XS18= /
INDEPENDENT CLAIMS / minus 3 =	X43= OR X86=
MULTIPLE DEPENDENT CLAIM PRESENT	
* If the difference in column 1 is less than zero, enter "0" in column 2	
Awayer CLAIMS AS AMENDED - PART II	TOTAL OR TOTAL 770 OTHER THAN
5 3 06 (Column 1) (Column 2) (Column 3)	SMALL ENTITY OR SMALL ENTITY
CLAIMS REMAINING AFTER AMENDMENT REMAINING PREVIOUSLY PAID FOR CLAIMS REMAINING REMAINING PREVIOUSLY PAID FOR	RATE TIONAL RATE TIONAL FEE
Total • 9 Minus • 20 = 8	X\$ 9= OR X\$18=
Total - 9 Minus - 3 = 8	X43= OR X86=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	+145= OR +290=
RCE	TOTAL OR TOTAL
10-16-0 (Column 1) (Column 2) (Column 3)	ADDIT. FEE ADDIT. FEE
CLAIMS REMAINING AFTER AFTER AMENDMENT Total	RATE TIONAL RATE TIONAL FEE
Total • 9 Minus • 20	X\$ 9= OR X\$18=
E Independent 1. Indias and .	X43= OR X86=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	+145= OB +290=
	TOTAL OR TOTAL
(Column 1) (Column 2) (Column 3)	ADDIT. FEEL
CLAIMS REMAINING AFTER AFTER AMENDMENT Total Independent Minus Total Total	RATE TIONAL RATE TIONAL FEE
Total • Minus ••	XS 9= OR XS18= .
Independent • Minus • •	X43= OR X86=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	0h
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	+145= OR +290= TOTAL OR ADDIT. FEE
The "Highest Number Previously Paid For" (Total or Independent) is the highest number	found in the appropriate box in column 1. Pages and Trademark Otics, U.S. DEPARTMENT OF COMMERCE